

01576 U.S. PTO  
05/23/03

<b>UTILITY PATENT APPLICATION TRANSMITTAL</b>  (Only for new nonprovisional applications under 37 C.F.R. § 1.53(b))	Attorney Docket No.	CPR-00101.P.1-US
	First Inventor or Application Identifier	Miyazaki, Mizuo
	Title	Methods for Preventing Adhesion Formation Using Protease Inhibitors
	Express Mail Label No.	EL 892181348 US
<b>APPLICATION ELEMENTS</b> See MPEP chapter 600 concerning utility patent application contents	ADDRESS TO: Mail Stop Patent Application Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450	
1. <input checked="" type="checkbox"/> * Fee Transmittal Form (e.g. PTO/SB/17) (Submit an original and a duplicate for fee processing) 2. <input checked="" type="checkbox"/> Specification [Total Pages of application 31] 3. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets 6]  4. Oath or Declaration a. <input checked="" type="checkbox"/> Newly executed (original or copy) b. <input type="checkbox"/> Copy from a prior application (37 C.F.R. § 1.63(d)) (For continuation/divisional with Box 16 completed) i. <input type="checkbox"/> <b>DELETION OF INVENTOR(S)</b> Signed statement attached deleting inventor(s) named in the prior application See 37 C.F.R. §§ 1.63(d)(2) and 1.33(b).  5. <input type="checkbox"/> Microfiche Computer Program (Appendix) 6. Nucleotide and/or Amino Acid Sequence Submission (If applicable, all necessary) a. <input type="checkbox"/> Computer Readable Copy b. <input type="checkbox"/> Paper Copy (identical to computer copy) c. <input type="checkbox"/> Statement verifying identity of above copies		
<b>ACCOMPANYING APPLICATION PARTS</b>		

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FEE TRANSMITTAL		Complete if Known	
Patent fees are subject to annual revision on October 1. These are the fees effective October 1, 1997. Small Entity payments <u>must</u> be supported by a small entity statement, otherwise large entity fees must be paid. See Forms PTO/SB/09-12. See 37 C.F.R. §§ 1.27 and 1.28.		Application Number:	To be determined
		Filing Date:	Herewith
		First Named Inventor:	Miyazaki, Mizuo
		Group / Art Unit:	To be determined
Total Amount of Payment	\$501.00	Docket Number:	CPR-00101.P.1-US

METHOD OF PAYMENT
1. <input type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any over payments to: Deposit Account Number: <input type="checkbox"/> Deposit Account Name: <input type="checkbox"/> <input checked="" type="checkbox"/> Charge Any Additional Fee Required Under 37 C.F.R. §§ 1.16 and 1.17 <u>Deposit Account Number 501321</u> <input type="checkbox"/> Charge the Issue Fee Set in 37 C.F.R. § 1.18 at the Mailing of the Notice of Allowance.
2. <input checked="" type="checkbox"/> Payment Enclosed <input checked="" type="checkbox"/> Check Number <u>2291</u> <input type="checkbox"/> Money Order <input type="checkbox"/> Other

FEE CALCULATION						
1. BASIC FILING FEE						
	Large Entity Fee Code	Large Entity Fee (\$)	Small Entity Fee Code	Small Entity Fee (\$)	Fee Description	Fee Paid
	1001		2001	375.00	Utility Filing Fee	\$375.00
	106		206		Design Filing Fee	\$
	107		207		Plant Filing Fee	\$
	108		208		Reissue Filing Fee	\$
	114		214		Provisional Filing Fee	\$
SUBTOTAL (1)						\$ 375.00

2. EXTRA CLAIM FEES								
				Extra Claims		Fee From Below		Fee Paid
Total Claims	[34]	-20 **	Equals	[14]	Times	[9.00]	Equals	\$126.00
Independent Claims	[2]	-3 **	Equals	[0]	Times	[0]	Equals	\$ 0.00
Subtotal (2)								\$126.00
** or number previously paid, if greater, For Reissues, see below								
	Large Entity		Small Entity		Fee Description			
	Fee Code	Fee (\$)	Fee Code	Fee (\$)				
	1202		2202	9.00	Claims in excess of 20			
	1201		2201	42.00	Independent claims in excess of 3			
	104		204		Multiple dependent claim, if not paid			
	109		209		** Reissue independent claims over original patent			
	110		210		** Reissue claims in excess of 20 and over original patent			

7. ☐ Assignment Papers (cover sheet & documents(s))

8. ☐ 37 C.F.R. § 3.73(b) Statement  
(when there is an assignee)  
☒ Power of Attorney

9. ☐ English Translation Document (if applicable)

10. ☐ Information Disclosure Statement (IDS)/PTO-1449  
☐ Copies of IDS Citations

11. ☐ Preliminary Amendment

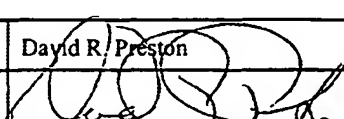
12. ☒ Return Receipt Postcard (MPEP 503)  
(Should be specifically itemized)

13. ☒ \* Small Entity Statement(s) (PTO/SB/09-12)  
☐ Statement filed in prior application. Status still proper and desired

14. ☐ Certified Copy of Priority Document(s)  
(If foreign priority is claimed)

15. ☒ Other: Certificate of Mailing by Express Mail

16. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment:  
☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) Of prior application No: \_\_\_\_\_  
Prior application Information: Examiner \_\_\_\_\_ Group Art Unit \_\_\_\_\_  
**For CONTINUATION or DIVISIONAL APPS only:** The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion as been inadvertently omitted from the submitted application parts.

17. CORRESPONDENCE INFORMATION			
<input checked="" type="checkbox"/> Customer Number <b>24232</b> or Bar Code Label [       ]			
<input type="checkbox"/> Correspondence address below			
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Signature		Date	6/23/03

Corresponds to PTO/SB/05